### FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00

SEC USE ONLY					
Prefix		Serial			
DATE RECEIVED					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)					
Millenium E&P Resource Fund I, LLC Units of Membership Interests	<u> </u>				
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	PROCESSED				
Type of Filing:	PROCESSED				
A. BASIC IDENTIFICATION DATA	№ 0CT 1 5 2008				
1. Enter the information requested about the issuer	THOMSON REUTERS				
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	IHOMOON KEOLEKO				
Millenium E&P Resource Fund I, LLC					
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
250 Sterling Avenue, Winter Park, Florida 32789	407-622-1939				
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
(if different from Executive Offices)	Mali Processing				
	Senting				
Brief Description of Business					
To acquire working, royalty and other interests in oil and gas drilling projects.	UUT n 72nna				
	0.1 £0ff8				
Type of Business Organization	100-4				
	please specify): Washington DC				
business trust limited partnership, to be formed limited liabil	ity company already formed				
Month Year					
**************************************	mated				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:					
CN for Canada; FN for other foreign jurisdiction)					
CENEDAL INCEDICTIONS					

#### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
• Each general and managing partner of partnership issuers.
Check Box(es) that Apply:   Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Muckleroy, J. Michael
Business or Residence Address (Number and Street, City, State, Zip Code) 250 Sterling Avenue, Winter Park, Flroida 32789
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Sawruck, Michael
Business or Residence Address (Number and Street, City, State, Zip Code)
1410 Alberta Drive, Winter Park, Florida 32789
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
Full Name (Last name first, if individual) Sterne, Robert G.
Business or Residence Address (Number and Street, City, State, Zip Code) 1100 New York Avenue, NW, Washington, DC 20005
Check Box(es) that Apply: Promoter Beneficial Owner DExecutive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Pick, Dennis
Business or Residence Address (Number and Street, City, State, Zip Code)
5521 Research Park Drive, Baltimore, Maryland 21228
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

\[ \]				<del></del>	В. І	NFORMAT	ION ABOU	IT OFFER	ING				
1.	Has the	issuer sol	d or does ti	he issuer ii	ntend to se	ll to non-s	occredited i	investors i	n this offer	ine?		Yes	No <b>K</b> i
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							<u> </u>	123				
2.								<b>\$</b> 6	2 <u>,50</u> 0				
•	. what is the minimum investment that will be accepted from any individual?								Yes	No			
3.			permit join									_	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering if a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								he offering with a state	<b>:</b>			
	II Name ( one	Last name	first, if ind	ividual)									
		Residence	Address (N	lumber and	d Street C	ity State 2	Zin Code)				· .		
Б	3111033 01	Residence	Addiess (i	terriber Ein	a street, e	ny, siate, z	sip code;						
Na	me of As	sociated B	roker or De	aler						<u>-</u>			
Sta			Listed Ha										
	(Check	"All State:	s" or check	individual	States)		**************	•••••	•••••		••••••	☐ AI	11 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	ll Name (	Last name	first, if ind	ividual)	· · · · · · · · · · · · · · · · · · ·		_					<u>-</u> .	
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	***************************************	••••••••			**************	***************************************	All States	
	AL IL MT RI	IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	ividual)		···· ,							
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)	<del></del>			<u>.</u>		
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1

۱.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	:	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify Units of Membership Integrests	\$ 2,625,000	\$2,625,000
	Total	\$ 2,625,000	\$2,625,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	1	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	12	\$ <u>2,625,000</u>
	Non-accredited Investors	0	\$ <u></u>
	Total (for filings under Rule 504 only)		<b>s</b>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		s
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees		\$_20,000
	Accounting Fees	_	\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Travel, courier fees and other miscellaneous offering expenses		\$ 5,000
	Total	_	\$ 25,000

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1		
	and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 2,600,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	□ \$	<b>\$</b>
	Purchase of real estate	<u></u> \$	\$
	Purchase, rental or leasing and installation of machinery and equipment		
	Construction or leasing of plant buildings and facilities	□ \$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	. 🗆 \$
	Repayment of indebtedness	<b></b>	
	Working capital	S	<b>Z</b> \$ 80,000
	Other (specify): Purchase of working, royalty and other itnerests in oil and gas		\$2,520,000
	drilling projects		
		\$	s
	Column Totals		<b>Z</b> \$2,600,000
	Total Payments Listed (column totals added)	<u> </u>	<u>,600,00</u> 0
	D. FEDERAL SIGNATURE	· · · · · · · · · · · · · · · · · · ·	<del></del>
Th	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notic nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commit	e is filed under Ru	le 505, the following
	information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of		
lss	uer (Print or Type)	Date	······································
M	lillenium E&P Resource Fund I, LLC	October	6, 2008
Na	me of Signer (Print or Type)  T tle of Signer (Print or Type)		
J	. Michael Muckleroy Chief Executive Officer		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)